

LEVEL 1 EXP ☐ LEVEL 1 ☐
Submit (7) Complete Sets of Site Plans
Pre-Application Conference ☐

LEVEL II ☐ LEVEL III ☐
Submit (17) Complete Sets of Site Plan
Pre-Application Conference ☐

(Area of Town)

N S E W C

With Whom? _____

With Whom? _____

CITY OF ASHEVILLE ZONING PERMIT APPLICATION

APPLICATION # _____ P & Z Module # _____

APPLICATION DATE _____ ZONING DISTRICT _____

PROJECT NAME _____ PIN _____

PROPERTY LOCATION _____

FLOOD PLAIN ☐ ZONE _____ OVERLAY ZONE _____ LOT SIZE _____ SQ FT/ACRE

OCCUPANCY TYPE

COMMERCIAL: ☐ RESIDENTIAL: ☐ Single Family ☐ Multi-Family, # of Units ____ ☐ Manufactured Housing

Project Description/Comments: _____

PROJECT TYPE

☐ NEW ☐ ADDITION ☐ RENOVATION ☐ PLANNED UNIT DEVELOPMENT
☐ CHANGE OF USE / PRIOR USE _____ IF VACANT, HOW LONG? _____

Square Footage of Project: _____ / Project Cost: \$ _____

PROPERTY OWNER _____ PHONE _____ ☐ NEW OWNER

ADDRESS _____ CITY _____ ST _____ ZIP _____

CONTACT FOR PROJECT _____ PHONE _____ FAX _____

ADDRESS _____ CITY _____ ST _____ ZIP _____

ARCHITECT / L.A. _____ PHONE _____ FAX _____

CONTRACTOR _____ PHONE _____ FAX _____

IF A PERMIT IS GRANTED I/WE AGREE TO CONFORM TO ALL APPLICABLE CITY ORDINANCES, ZONING REGULATIONS, AND THE LAWS OF THE STATE OF NORTH CAROLINA REGULATING SUCH WORK AND I AGREE TO CONFORM TO THE SPECIFICATIONS OF THE PLANS WHICH I/WE HAVE SUBMITTED WITH THIS APPLICATION. I/WE HEREBY SWEAR THAT THE FOREGOING STATEMENTS ARE ACCURATE AND CORRECT TO THE BEST OF MY/OUR UNDERSTANDING AND KNOWLEDGE AND THAT I AM THE OWNER OR A DULY APPOINTED AGENT OF THE OWNER.

SIGNATURE OF APPLICANT

PRINT NAME

PLEASE NOTE REQUIRED SETBACKS (TO BE MEASURED IN THE FRONT FROM THE EXISTING RIGHT OF WAY AND ALL OTHERS TO BE MEASURED FROM PROPERTY LINES)

REQUIRED SETBACKS: FRONT _____ RIGHT _____ LEFT _____ REAR _____

☐ CORNER LOT ☐ THRU LOT ☐ APPROVED ☐ DENIED ☐ APPROVED WITH CONDITIONS (Attached)

SIGNATURE OF REVIEWER

DATE

Permit Fee: \$ _____

Date Paid: _____

ASHEVILLE FIRE & RESCUE DEPARTMENT
REQUEST FOR FIRE PROTECTION WATER SUPPLY ANALYSIS

This form must accompany the submittal for a zoning permit for each proposed building.

The City of Asheville requires that adequate water flow for fire fighting purposes be available at all building projects. The amount of water needed, defined as fire flow in the city ordinances, will be calculated from the information supplied on this document.

PERMIT OFFICE USE ONLY / Application Numbers:

Zoning _____ Building _____

Project Name _____

Address _____

PIN _____

Describe the intended use _____

Basic Project Information:

Number of stories _____ Type of construction as defined in the International Building Code _____
(See reverse of this form for guidance and/or contact your designer)

Is the building fully sprinklered? _____ Have plans been submitted for a building permit? _____

Have plans for any water line extensions been submitted to City Engineering for approval? _____

Square footage of the largest floor _____

You must attach a copy of your project water flow test conducted for this project by the City of Asheville Water Dept. or approved Letter of Commitment.

The applicant affirms by their signature that the information supplied on this form is accurate.

_____/ Date _____ / Phone _____
Signature

FIRE MARSHAL'S OFFICE USE ONLY

Reviewed by: _____ Date: _____

Required fire flow _____ gpm @ 20 psi residual pressure

Results of fire flow test _____ gpm @ 20 psi residual pressure

Approved: Yes _____ No : _____ (See attached review comments)

ORIGINAL: FILE

COPY ONE: ZONING

COPY TWO: APPLICANT